

PARENTAL CONSENT FORM

YEAR ROUND SHORT COURSES AT CATS, CSVPA & STAFFORD HOUSE INTERNATIONAL



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This Parental Consent Form is to be completed by a parent or legal guardian of students under the age of 18 years old that are booked on a year round course offered by CATS Colleges, CSVPA or Stafford House International.
CATS and CSVPA year round short courses are booked and managed in association with Stafford House International

To enable us to look after your child and to ensure that they are safe and happy while in our care, please can we ask you to complete the form below. Please can you provide as much detail as possible and provide honest and accurate responses. We thank you for taking the time to complete the form.

Please complete this form in **CAPITAL LETTERS** in black ink.

STUDENT DETAILS	PARENT/LEGAL GUARDIAN DETAILS
Student's full name:	Your full name:
Student's mobile phone number:	Relationship to student:
Centre:	Your email address:
Arrival Date:	Your mobile phone number:
Departure Date:	Your home phone number:
Sales Representative (full name):	Your work phone number:

MEDICAL CONSENT FORM	
Please answer each of the medical consent form questions below. We will make reasonable adjustments to help your child with any particular physical or learning needs	
Has your child ever suffered from a serious medical condition? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify:
Does your child have any other current medical conditions? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify:
Is your child currently undergoing a course of medical treatment? Yes <input type="radio"/> No <input type="radio"/>	If yes, which medicines do they take (please also specify dosages/frequency)?
Is your child currently prescribed any long-term medication? Please note that your child will need to bring enough medication for the duration of their stay Yes <input type="radio"/> No <input type="radio"/>	If yes, which medicines do they take (please also specify dosages/frequency)?
Does your child carry any lifesaving medication (for example: an EpiPen)? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify:
Does your child have any developmental or learning difficulties? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify. This is to help us accommodate their needs as best as we can.
Does your child have any physical disabilities that would require us to make any adjustments? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify. This is to help us accommodate their needs as best as we can.
Does your child have, or has previously had, any mental health concerns? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify. This is to help us accommodate their needs as best as we can.
Does your child suffer from asthma or a cardiac condition? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify:
Does your child have any allergies? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify and indicate how severe the allergy is:
Do you consent for your child to be given non-prescription if appropriate (paracetamol/aspirin) painkillers? Yes <input type="radio"/> No <input type="radio"/>	
Is there anything else that you would like to tell us about your child?	

We want our students to have the care and support they need to have a full and enjoyable experience at Stafford House. There may be circumstances where we cannot provide the required level of care and in these cases we may not be able to continue with the application. Please refer to our terms and conditions for more information.

Please sign your medical consent on the following page

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PARENT/LEGAL GUARDIAN'S SIGNATURE

I understand that by signing below, I give my consent as follows:

- I consent to Stafford House International processing my child's allergies/disabilities/medical conditions information that I have provided as part of this application.
- I consent to Stafford House International acting on my behalf in case my child has a medical emergency, and I consent for a qualified state-doctor to give any medical treatment necessary, including an operation and/or the administration of an anaesthetic if I cannot be contacted.

Signed:	Date:
	You have the right to withdraw your consent at any time by emailing the CATS Global Schools Protection Officer on dpo@catsglobalschools.com
Parent/Guardian Level of English Spoken:	I can accept and understand calls/emails in English
	English may be difficult. If possible please contact me in my native language

PHOTOGRAPHY & VIDEO

Stafford House Study Holidays and/or its representatives may take photographs or video footage of students participating in activities for promotional and marketing purposes. Photographs and video footage may be used on Stafford House Study Holidays website, social media channels and printed materials.

- I understand that Stafford House Study Holidays may take photographs or video footage of students at their centres.
- I consent that the photos or video footage may then be used for promotional purposes for Stafford House Study Holidays.
- I consent that the photos or video footage may be used on Stafford House Study Holidays social media channels, including but not limited to Facebook, Instagram and TikTok.
- I understand that by signing below, I acknowledge and confirm that I give consent to this.

Signed:	Date:
Please print, sign by hand (in black ink) and scan	

PARENT/GUARDIAN AUTHORISATION (ONE SIGNATURE FOR ALL, AT BOTTOM OF STATEMENTS)

Student welfare and school rules

- I authorise Stafford House International to look after my child's welfare for the duration of the course.
- I confirm that my child has read and will follow your School Rules and Anti-Bullying Policy which can be found at www.studyholidays.com/school-rules
- My child and I understand that there are consequences for breaking school rules and UK laws including: theft, vandalism, bullying, buying or consuming alcohol, cigarettes or drugs. If they break any school rules or UK laws, students may receive sanctions or be sent home. I agree that if my child is sent home early, I will be available to accept them back into my care or will nominate, and give written consent to, a suitable adult to act in my place. Flights home will be at the cost of the parent/legal guardian.
- My child is aware that they may only leave campus with their Group Leader or a member of Stafford House staff, or if arrangements have been agreed with a responsible member of Stafford House staff.
- If my child comes to the centre with a Group Leader, I give permission for them to take my child with the group off-site and away from the planned programme
- My child is aware that they must not invite visitors onto the school campus or into any school building without prior authorisation from Stafford House International.

Lessons, activities and excursions

- I understand that Stafford House International provides a complete programme of lessons, activities and excursions, and my child will participate in the full programme.
- I consent for my child to take part in the Stafford House International's activities programme which may include sports, arts and crafts, drama, dance, team games, workshops, quizzes, discos, talent shows and other activities.
- I consent for my child to take part in the Stafford House excursion programme, including local visits, and I understand that my child may be given some free time if appropriate to do so. The amount of free time given will depend on the location, age of the students, and factors such as the weather and how busy the area is. It may be the case that 12–15-year-olds will have less free time (1 hour) than 16–17-year-olds (2 hours). A monitored meeting point will be arranged so students are able to return at any time.
- I consent for my child to travel accompanied by the school staff by train, bus, underground/subway, coach or taxi when needed.
- I understand that my child will have free time at lunch to go to the canteen or into town to do some shopping, plus a couple of evenings free per week on their own without a group leader. My child is aware that he/she must not leave the school campus unless it has been agreed with his/her group leader or member of Stafford House staff.

Homestay accommodation students only

- I give permission for my child to stay in a host family carefully selected by Stafford House Study Holidays, with other students aged under 18.
- I understand that my child may travel to/from school unaccompanied.

Continued on the following page

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Data protection

- To deliver education and protect students' welfare, Stafford House International will collect, keep and otherwise process personal data, including sensitive and special category personal data (as defined in the DPA and GDPR respectively) that relates to the student and their circumstances. We will always keep this information secure and we will share it within Stafford House Study Holidays as necessary to run our business, deliver the student's education and ensure their safety. We will also release the data where it is legally required or lawful to do so, or in the event of a medical emergency if it is necessary to protect their health or the health of others. I consent to my child's data being stored, processed and released by Stafford House International in this way. I consent to my child's sensitive personal data, which may include: personal data revealing racial or ethnic origin; personal data revealing political opinions; personal data revealing religious or philosophical beliefs; genetic data; biometric data (where used for identification purposes); data concerning health; data concerning a person's sexual orientation and other data being stored, processed and released by Stafford House International in this way. A copy of our full privacy notice can be found at www.catsglobalschools.com/info/privacy-notice.htm
- I understand that Stafford House International, to ensure my child's wellbeing, may share my child's information with centre/school staff and relevant service providers i.e., catering/accommodation.

Consent form and terms & conditions

- I confirm that, to the best of my knowledge, the information given in this form is correct and complete.
- I confirm that I and my child have read and accept the Terms and Conditions of Stafford House International.

PARENT/LEGAL GUARDIAN'S SIGNATURE

I understand that by signing below I acknowledge and agree to the above statements.

Signed:	Date:
Please print, sign by hand (in black ink) and scan	
	When you have finished, please print this PDF, sign by hand (in black ink) and scan